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ABSTRACT

Little empirical research has focused on whether comprehensive service programs for pregnant teenagers and teenage parents have helped to prevent or reduce the occurrence of subsequent pregnancies. This 4-year follow-up study evaluated what impact 8 services provided by a nonprofit agency have had on preventing repeat pregnancies, including increasing the length of time before a subsequent pregnancy. Subjects (N=52) were unmarried black adolescent girls who were pregnant with their first child at the time they became affiliated with the agency. Based on agency records and staff interviews, the adolescent mothers were rated on their average level of involvement in each of the 8 services during the subsequent 2-year period after their initial referral to the agency. The adolescents' repeat-pregnancy outcomes were then assessed 4 years after their initial referral to the agency. The results of regression analyses indicated that adolescent mothers who had a higher level of participation in two combined pre- and post-birth service programs were significantly more likely to experience a longer period of time after their first pregnancy without a repeat or subsequent pregnancy. (Author/ABL)

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PREVENTING ADOLESCENT REPEAT PREGNANCIES: AN EVALUATION STUDY OF A COMPREHENSIVE SERVICE PROGRAM.

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Abstract

This is a report of a four-year follow-up evaluation study of the impact that a comprehensive service agency has on preventing repeat pregnancies among adolescents. The sample included 52 black, urban adolescents aged 12 to 19 years who were pregnant with their first child at the time they became affiliated with the not-for-profit agency. This particular agency provides eight primary programs including one pre-birth service, four combined pre- and post-birth services, and three post-birth services. Based on agency records and staff interviews, the adolescent mothers were rated on their average level of involvement in each of the eight services during the subsequent two-year period after their initial referral to the agency. The adolescents' repeat-pregnancy outcomes were then assessed four years after their initial referral to the agency. The results of regression analyses indicated that adolescent mothers who had a higher level of participation in two combined pre- and post-birth service programs were significantly more likely to experience a longer period of time after their first pregnancy without a repeat or subsequent pregnancy. Program and social policy implications are considered.

PREVENTING ADOLESCENT REPEAT PREGNANCIES:

AN EVALUATION STUDY OF A COMPREHENSIVE SERVICE PROGRAM.

Teenage pregnancy has received considerable attention in recent years. Little empirical research, however, has focused on whether comprehensive service programs for pregnant teenagers and teenage parents have helped to prevent or reduce the occurrence of subsequent pregnancies. The purpose of this four-year follow-up study is to evaluate what impact eight services provided by a nonprofit agency have had on preventing repeat pregnancies, including increasing the length of time before a subsequent pregnancy.

The not-for-profit agency under study, located in a northern suburb of Chicago, began offering social service programs to adolescent parents in 1979. It now provides eight primary programs including one pre-birth service, four combined pre- and post-birth services, and three post-birth services. (Each program is briefly described in the appendix.)

Method

The sample included 52 unmarried adolescent girls. All subjects were drawn from a larger sample of 296 black adolescent girls who had previously participated in an evaluation conducted at the agency. This prior evaluation included every girl who ever became affiliated with the agency as a parent or pregnant adolescent between January, 1979 and March, 1985. The present subsample includes all girls in the original sample who, when they were referred to the agaency, were: (1) single, (2) between the ages of 12 and 19, (3) pregnant with their first child, and (4) became affiliated from 1981 to 1983 since record-keeping for daily attendance began in late 1980.

The involvement of the 52 adolescents in the eight service programs was assessed two years after they were referred to the agency (1983 to 1985).

The subjects were again followed-up four years after their initial referral to determine if a second pregnancy had occurred (1985 to 1987).

The adolescents were rated on their involvement in eight agency programs including the one pre-birth service, the four combined pre- and post-birth services, and the three post-birth services. Three levels of service utilization (low, moderate, and high) were operationally defined according to how often the program was scheduled to meet each week, month, or year. Each adolescent mother's level of involvement in each program was rated in terms of these three ordinal levels; agency records were not sufficiently detailed to allow for more precise ratings.

The adolescents were also rated on two outcome measures: repeat pregnancy and length of time without a repeat pregnancy.

Results

Over a four-year period there were 7 (13.46%) repeat pregnancies among the sample of 52 girls. Four (7.69%) of the 52 girls had a repeat pregnancy within 24 months of the index delivery. This finding of 7.69 percent of repeat births compares quite favorably to those among black women (19 years or younger) within a 24 month period in previous reports.

Repeat Pregnancy as a Dependent Variable

A total of 11 independent variables were considered in both the stepwise and hierarchal multiple regression models. The results of these analyses revealed that none of the variance explained by any of the independent variables was statistically significant.

Length of Time without a Repeat Pregnancy as a Dependent Variable

A total of 11 independent variables were also available for entry into a stepwise multiple regression analysis of the length of time without a repeat pregnancy. The results indicated that one service variable, participation in

the Partners program, was identified as making a significant ($p < .002$) contribution to the explained variance (17.7 percent). In sum, the more adolescent mothers participated in Partners, the greater the length of time without a repeat pregnancy.

Hierarchical regression analysis was also conducted (see Appendix II). Two of the combined pre- and post-birth services, Beginnings and Partners, had p values significant at the .05 level, and together accounted for 15 percent of the variance in the length of time without a repeat pregnancy. When controlling for background variables, the variance explained by service programs was lowered from 18 percent to 15 percent.

Caveats to the study are listed in Appendix III.

The discussion will foucs on why did the Partners and Beginnings service programs had a greater individual impact upon the adolescents' pregnancy outcome. Many components of both programs are similar: adolescent mothers can acquire knowledge about motherhood, parenthood, and build a positive self-image in a secure environment. Individualized support complements routine structured classes on child development and parenting skills.

Appendix I
Eight Service Programs

Pre-birth Service

Transitional Learning Center. The Transitional Learning Center is a cooperative educational program between the agency and the local community high school. The program provides educational support for teenagers in their final trimester of pregnancy in an informal atmosphere. A qualified licensed educator is assigned by the high school to conduct regular accredited classes daily (Monday-Friday) at the agency. Additional workshops and self-help groups are held after the morning classes convene. The goal of TLC is to enable these students with special needs to continue their education during and after pregnancy.

Combined Pre- and Post-birth Services

Educational Services. The agency also provides additional educational services to any individual interested in completing educational requirements or improving academic skills. These services include pre-testing for GED programs and courses, individual academic assessments and tutoring, average and remedial homework assignments, and training for vocational programs. The goals of these services are to help teenagers and older individuals in the community complete their education and expand their educational and career opportunities. Educational services are available four days a week (Monday-Thursday).

Beginnings. Beginnings is an educational program for pregnant adolescents and adolescent mothers, sponsored by the community health department. Educational classes are conducted by qualified health department personnel, representatives from the police and fire departments, Lamaze instructors, and other community volunteers. The goal of Beginnings is to provide high school adolescent mothers with information on motherhood and parenthood. Educational sessions are focused on reducing infant mortality and the incidence of repeat pregnancies, increasing awareness of fetal development and the process of labor and delivery, and increasing parenting skills. Topics discussed during educational sessions include: fetal development, Lamaze, breast feeding versus bottle feeding, exercises for pregnant women, family planning methods, prenatal and infant nutrition, label reading, dental health, safety, first aid, missing children, prevention of child molestation, sick baby care, well baby care, discipline, and child development. A so called "pre-test" and "post-test" is used at each daily session to provide the girls with feedback on how much they have learned, to evaluate the effectiveness of the lecture, and to solicit their suggestions for improving the session. Teenagers earn merit points for attending lectures and for completing the evaluations; monetary gifts are awarded on the basis of merit points earned. Beginnings meets one day a week for two hours.

Partners. The Partners program pairs expecting and novice mothers, 17 years or younger, who are interested in acquiring parenting skills or enhancing their personal development with adults who themselves were teenage parents. The older partners in the group function as positive role models who share and express mutual concern and guide the younger girls toward realizing their own and their children's potential. The junior partner also has a complementary role by expressing and working through problems with the help of the other group members, but especially with the assistance of one's senior partner. A major aim of this interaction is to create a sense of responsibility and maturity among expecting teenagers and teenage mothers. The goal of the group is to allow each junior partner to relate to that

special senior partner who is not their parent, but whose wisdom and concern may appear parent-like. As junior partners approach their eighteenth birthday, they are prepared to enter "Sisterhood," another agency support group that encourages the young women to be productive and responsible while they grow toward independence and adulthood. Partners is intensive; it meets daily, and two evenings a week, for two and one-half hours per meeting.

Sisterhood. Sisterhood, like Partners, also addresses the needs and concerns of pregnant and parenting women, but for women who are 18 years or older. This program borrows its philosophy from The Sisterhood of Black Single Mothers, Inc.; its goal is to foster the individual process of moving into one's full potential and expression of womanhood. The members of this support group strive to share successful experiences and failures as a way of learning. As part of a collaborative effort, the group takes information from individual presentations and "real life dramas" to develop new strategies and experiment with new approaches for coping with motherhood and single-parenthood in the eighties. Sisterhood, like Partners, meets for two and one-half hours daily (Monday-Friday).

Post-birth Services

Infant Day Care. The Infant Center is a licensed day care which provides quality day care for 10 to 12 infants and toddlers between the ages of 6 1/2 weeks to 2 years. The program is designed to serve only those mothers enrolled in Beginnings and who are returning to the local high school campus for classes. Before the child's second birthday the parent(s) are responsible for seeking and securing child care placements in the community.

The Infant Day Care Center also functions as an internship program for junior high school students. The goals are to provide quality care to infants and toddlers and provide students with an understanding of child development and the responsibility of child care. The Infant Center is open daily from 7:30 a.m. to 5:30 p.m. (Monday-Friday) and is closed when the high school is not in session.

Drop-In-Child-Care. This service is available for children of any age but only to children whose parents are using the services at the agency. The staff is responsible for providing quality child care, referrals, and resources to parents and children regarding parenting and child development issues. The staff also refers and monitors referrals to Woman Infant and Children (WIC), Well Baby Clinic, community day care facilities, Headstart placement, Beginnings, and medical and mental health facilities. Drop-In-Child-Care is available all day (Monday-Friday).

Well Baby Care. The agency houses one of the three Well Baby Clinics sponsored by the community health department. The clinic is committed to preventing illness and maintaining health for children from birth to age 5. The clinic provides regular medical check-ups, childhood immunizations, and counsels parents about normal child development. The program goal is to provide medical services to young children. Children are eligible for these services at no charge if the family qualifies financially. The community health department requires children under 1 year to have monthly check-ups and children 1-5 years to have annual check-ups.

Appendix II.

Results of stepwise and hierarchical regression analyses:
Repeat pregnancy as the dependent variable

Step and Independent Variable	Beta	Mult. R	R^2 Change	F Change	p Value
Stepwise--all variables available for entry.					
1. Partners	.421	.421	.177	10.77	<.002
Hierarchical--all variables forced to enter.					
Background Variables:					
1. Affiliation Age	-.050	.074	.005	.23	NS
2. Siblings Are Teen Parents	.084	.249	.056	2.94	NS
Pre-birth Service:					
3. Transtitional Learning Center	.111	.249	.000	.00	NS
Pre- and Post-birth Services:					
4. Beginnings	.403	.371	.076	4.13	<.05
5. Partners	.353	.462	.076	4.46	<.04
6. Sisterhood	.000	.463	.001	.04	NS
7. Educational Services	.132	.464	.001	.03	NS
Post-birth Services:					
8. Infant Day Care	.136	.464	.000	.01	NS
9. Well Baby Care	.029	.464	.000	.00	NS
10. Drop-In Child Care	.240	.479	.014	.75	NS
Participation Ratings:					
11. Total	.494	.521	.042	2.30	NS

Appendix III

Caveats

It is important to acknowledge three caveats regarding this follow-up evaluation study. First, it was not possible to randomly select subjects from the universe of teenagers or to randomly assign subjects to different service programs. This limits the generalizability of our findings to teens who are black, urban, poor, and unmarried. Fourthermore, because of a possible self-selection effect, it is not possible to establish causality. These methodological shortcomings, however, are common and almost ineviatable in research focusing on teenage parenting (cf. Everett, 1987). Second, participation ratings that are based on staff reports and agency records inevitably increase the amount of error in the data. In addition, it would have been preferable if more precise participation scales could have been used. However, the noise these limitations introduce into the data probably make it less, not more, likely that any impact of the agency programs will be measurably evident. Thus, the study's results may be a conservative estimate of the amount of variance in the outcomes accounted for by different agency programs. Finally, insufficient background information on many of the individual adolescents prevented a detailed analysis of the impact of variations in their personal backgrounds upon repeat pregnancies. All the adolescents, however, resided in environments that would be classified as high risk for repeat pregnancies (cf. Hogan & Kitagawa, 1985) and, in general, there appeared to be little variation among the subjects in terms of their backgrounds.